



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4007

<b>SERIAL NUMBER</b> 10/710,008	<b>FILING OR 371(c) DATE</b> 06/11/2004 <b>RULE</b>	<b>CLASS</b> 706	<b>GROUP ART UNIT</b> 2129	<b>ATTORNEY DOCKET NO.</b> 001345
------------------------------------	---	---------------------	-------------------------------	--------------------------------------

**APPLICANTS**  
 David Lawrence Von Kleeck, Valley Cottage, NY;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This appln claims benefit of 60/320,261 06/11/2003 *DR*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*NONE* *DR*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 07/15/2004 **\*\* SMALL ENTITY \*\***

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged <i>[Signature]</i> <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature Initials	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
---	-------------------------------	----------------------------	---------------------------	--------------------------------

**ADDRESS**  
29569

**TITLE**  
Second Opinion Selection System

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---